

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>VB</i>		<i>03-22-01</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>3-9-01</i>
FORMALITY REVIEW	<i>H-S</i>	<i>866</i>	<i>3-15-01</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

..... Rejected      N ..... Non-elected  
 ..... Allowed      I ..... Interference  
 ..... (Through numeral)..... Canceled      A ..... Appeal  
 ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	<i>02-18</i>
2	<i>02-24</i>
3	<i>02-21</i>
4	<i>02-21</i>
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11	<i>N</i>
12	<i>N</i>
13	<i>N</i>
14	<i>N</i>
15	<i>N</i>
16	<i>✓ =</i>
17	<i>✓ =</i>
18	<i>✓ =</i>
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24	<i>✓ =</i>
25	<i>N</i>
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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BEST AVAILABLE COPY

*03-16-01*

*106,01*  
*see 6552780*